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## LOCAL HEALTH DEPARTMENT/AGENCY -- PROCESS OBJECTIVE(S) (continued)

- 5. If the woman is above 100% of poverty and ineligible for Medicaid or Prenatal Initiative funding, compare income and family size to approved sliding fee scale to determine personal financial responsibility. Inform the client and arrange a payment plan. No client will be denied services for financial reasons.
- 6. Coordinate prenatal and postnatal referrals and discharge planning for other needed services, including but not limited to: WIC, Well Child, Community Mental Health, Family Planning, or Infant Development.
- 7. Quality assurance requirements are:
  - a. to implement a plan for Quality Assurance in the Prenatal Programs in collaboration with the Maternal Health Consultant, and approved by the Maternal and Infant Bureau; and
  - b. to assure that each woman has a management plan which addresses her problems and risk factors which is written in her chart: and
  - c. to report at the end of the fiscal year, progress toward objectives stated in Section II of this contract.

## LOCAL HEALTH DEPARTMENT/AGENCY--OUTCOME OBJECTIVE(S)

I. <u>Overall Program Goal</u> (Program Purpose Statement)

To assure that all women, regardless of income, age, place of residence, or ethnic background, have access to early comprehensive prenatal and postnatal care designed to meet individual needs and, ultimately, to reduce maternal and infant morbidity and mortality in the state of Utah.

## II. Specific Outcome Objectives for the Program

- 1. To provide or arrange for care for 3, women in Wasatch County.
- 2. The mortality rate among infants born to women enrolled in the program will be 8.5 deaths/1000 live births or less.
- 3. The low birthweight rate among infants born to women enrolled in the program will be 5.5 LBW infants/1000 live births or less.
- 4. The average number of weeks gestation upon enrollment in prenatal care will be 15 weeks or less.
- 5. The average number of prenatal visits will be 11 or more for women enrolled in the program.



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